

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-S	466	08-20-001
RESPONSE FORMALITY REVIEW	P.B	107	S13:1

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	Original 11/17/02
2	Final 11/24/02
3	Original 11/24/02
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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